## P96000 102259

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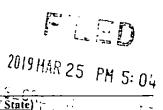


R. WHITE APR 0 4 2019

## COVER LETTER

TO: Amendment Sec Division of Corp			4.
NAME OF CORPO	Preferred Prescrip	tion, Inc.	**************************************
DOCUMENT NUMBER: P96000102259			
The enclosed Article	s of Amendment and fee are so	ibmitted for filing.	•
Please return all corre	espondence concerning this ma	tter to the following:	
	Samuel D. Navon, Esq.		
		Name of Contact Person	1
	Samuel D. Navon, P.A.		
		Firm/ Company	
	7805 S.W. 6th Court		ų•
		Address	•
	Plantation, FL 33324		•
		City/ State and Zip Cod	<u> </u>
			•
snav	on@navonlaw.com	sed for future annual report	notification)
	13-man address. (10 0c ti	sed for ratine annual report	nouncution)
For further information	on concerning this matter, pleas	se call:	
Samuel D. Navon		at (	380-8848
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amenc Divisio Clifton 2661 E	Address Iment Section on of Corporations Building- executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Preferred Prescription, Inc.		5 00
(Name of Corpo	oration as currently filed wit	ith the Florida Dept. of State)
P96000102259		TO THE PER P
(De	ocument Number of Corporati	tion (if known)
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Pr</i>	Profit Corporation adopts the following amendment
A. If amending name, enter the new name of th	ne corporation:	
Preferred Industries, Inc.		The _new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A pi	ipany," or "incorporated" or the abbreviation
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u> .	eable: ADDRESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>	
<ul> <li>If amending the registered agent and/or reg new registered agent and/or the new register</li> </ul>		orida, enter the name of the
Name of New Registered Agent		
	(Florida street address)	s)
New Registered Office Address:		, Florida
-	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ccept the obligations of the position.
<del></del>	Signature of Mary Pagieta ad.	Lagnt if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	oc	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<del></del>	_		
Add				
Remove				

	g additional Articl ets, if necessary).	(Be specific)			
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	<del></del>				<del></del> .
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	_,				
·				<del></del>	<del></del> -
	vides for an excha-	nge, reclassificati	on, or cancellation	of issued shares,	
an amendment prov	menting the ameno	<u>dment if not conta</u>	lined in the amend	lment itself:	
rovisions for implet	andiana, MAS				
an amendment provisions for implem (if not applicable	, indicate N/A)				
rovisions for implet	, indicate N/A)				
rovisions for implet	, indicate N/A)				
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rovisions for implet	, indicate N/A)				

The date of each amendment(s) as	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	slock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
March 19. Dated	2019	
Signature	/ hu /M/11	
(By a d	irector, president or other officer if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Kevin Singer	
	(Typed or printed name of person signing)	<del></del>
	Vice President	
	(Title of person signing)	